

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.G.		12/12
O.I.P.E. CLASSIFIER			12-15-12
FORMALITY REVIEW		21423	12-15-12
RESPONSE FORMALITY REVIEW		21423	3-1-13

INDEX OF CLAIMS

- ✓ _____ Rejected
- _____ Allowed
- (Through summary) _____ Cancelled
- + _____ Restricted
- H _____ Non-elected
- I _____ Interference
- A _____ Appeal
- O _____ Objected

Claim	Date	Claim	Date	Claim	Date
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If more than 150 claims or 10 actions
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